

## **SAMPLE Policy for Financial Hardship (Charity Care)**

It is expected that patients will pay for healthcare services that are rendered. This practice will assess the needs of particular patients that have indicated a possible financial hardship. Patients will be determined to be under such hardship using the current Federal poverty guidelines issued by the federal government.

### **Sample Procedures for Financial Hardship (Charity Care)**

Charity Care may be extended those patients who qualify for the following reasons:

- The patient is unable to pay for any of the services provided and can not commit to installment plan due to financial hardship
- The patient is currently not eligible for assistance programs on the state level or is pending approval by same agencies
- The patient is willing and able to make payment at the time our clinic grants a discount

Upon the patient qualifying for Charity Care for one of the reasons cited above, the patient shall provide proof of their hardship. The patient will need to produce the following: Current year federal 1040 tax return, a copy of their last two paycheck receipts (if applicable), last two unemployment benefit check stubs, or proof of eligibility with State Agencies. The patient is also to complete a Charity Care Application that is to be kept on file in the patient's medical record and updated annually as the need for assistance continues.

The Office Manager or billing office staff will use the Federal Poverty Guidelines to determine eligibility for charity care. This shall be assigned on a set percentage rate.

Patients excluded from this policy would be:

- Those patients receiving cosmetic procedures
- Patients that are possibly eligible for but have not yet applied for medical insurance or assistance programs sponsored by federal, state or local government.

Once the patient has been identified as being eligible for the charity care, a note will be placed in the patient's paper or electronic medical record. This shall be reviewed and documented in the patient's medical record at the minimum of every 3 months.